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₹.	o	UTILITY	10 165	1	ney Docket No.		1E-0115-				
₹3		IT APPLICATION		First	Inventor	ROG	ELJ, Sn	ezna			
	TR	ANSMITTAL		Title	Inhibition of Co	ell Su	ırface Pr	otein Disulfide			
7	(Only for new nonprovi	sional applications under 37 CFR 1.5	3(b))	Expre	ss Mail Label No	p					
	APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.				ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231						
Т	Fee Transmitta	Fee Transmittal Form (e.g., PTO/SB/17)			CD-ROM or CD-R in duplicate, large table or						
	2. X Applicant claims small entity status. See 37 CFR 1.27.				Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission						
1	3. X Specification (preferred arrangen	[Total Pages 38]	a.	(if applicable, all necessary) a. Computer Readable Form (CRF)							
1		Descriptive title of the invention Cross Reference to Related Applications Statement Reparting Fed appreciates Statement Reparting Fed appreciate B & D Reference to sequence listing, a tibele, or a computer program listing appendix Background of the Invention Bird Summary of the Invention Bird Summary of the Invention Bird Summary of the Invention Bird Description of the Drawings of Repl			b. Specification Sequence Listing on:						
1	 Statement Re 					OM or	CD-R (2 oc	pies); or			
1	or a compute - Background				ii. D paper	State	ement in	Prelim. Amend above copies			
1	- Brief Summa				ACCOMPANY						
1	- Detailed Des - Claim(s)							t & document(s))			
1		of the Disclosure			37 CFR 3.73((when there is			Power of Attorney			
- 4	I. X Drawing(s) (35	U.S.C. 113) [Total Sheets 6];	111.	English Trans						
	5. Oath or Declaration	[Total Pages 2	12.	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations							
1	a. Newly exe	13.	13. X Preliminary Amendment								
1	o. La (ror continu	cuted (original or copy) a prior application (37 CFR 1.63 (d)) uationidivisional with Box 18 complete	d)	14.	X Return Recei	pt Post	tcard (MPE	P 503)			
	i. DELETION OF INVENTOR(S) Signed statement attached deleiting inventor(s) named in the prior application, see 37 CFR 1 63(d)(2) and 1.33(b).				15. Certified Copy of Priority Document(s)						
1					16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35						
L		a Sheet. See 37 CFR 1,76		or its equivalent. 17. X Other: Associate Power of Attornov							
11	B. If a CONTINUING APPI in an Application Data Si	LICATION, check appropriate box, an	d sup	oply the rec	uisite information be	low ar	d in a prelir	ninary amendment,			
"	Continuation X	Divisional Continuation-in-part				09	,424.18				
	Prior application information:	Examiner KLINE, E.	_		276	2					
B	ox 5b, is considered a part he incorporation can only b	SIONAL APPS only: The entire disclosur of the disclosure of the accompanying of e relied upon when a portion has been in	adve	rtentiy omit	ted from the submitte	n oath nd is h d appli	or declarati ereby incorp cation parts.	on is supplied under orated by reference.			
1		19. CORRESP	OND	ENCE AD	DRESS						
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7		United States	Tele	ephone	703-591-2664		Fax	703-591-5907			
	Name (Print/Type)	Mark J. Guttag)_	Reg	Registration No. (Attorney/Agent) 33,057						
	Signature	WALL TO	4			D	ate Dec	. 05, 2001			
the a 2023 Wash	mount of time you are requir 1. DO NOT SEND FEES O lington, DC 20231.	is estimated to take 0.2 hours to complete ad to complete this form about the sent to R COMPLETED FORMS TO THIS ADD	o the RESS	le will vary d Chief Inform S. SEND TO	epending upon the nee lation Officer, U.S. Pati D: Assistant Commission	ds of the ent and oner fo	ndividual	ase Any comments on			



CLAL	FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS	
,	TOTAL CLAIMS	10-20	0	x\$18=	\$0	
	INDEPENDENT CLAIMS	1-3	0	x\$84 =	\$0	
	MULTIPLE DEPENDEN	T CLAIM(S) (if applicable	e)	+\$270=	\$0	
			BASIC FEE		\$740.00	
	TOTAL OF ABO		VE	\$0		
	REDUCTION BY 50% FOR		\$370.00			
				TOTAL=	\$370.00	

- 1.

 A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed
- 2. 🗵 The Commissioner is hereby authorized to charge any additional fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 10-0233 UNME-0115-1.
- 3. ☐ A check in the amount of ______ is enclosed.
- 4. 🗵 Cancel in this application original claims 1, 2, 3, 4, 5, 6, 7, 8, 16, 17 and 18 of the prior application before calculating the filing fee. (At least one original independent claim must be retained for filing purposes.)

Address all future communications: (May only be completed by applicant or attorney/agent of record.)

JAGTIANI + GUTTAG Democracy Square Business Center 10379-B Democracy Lane Fairfax, Virginia 22030

December 5, 2001

Attorney or Agent of Record ☐ Inventor(s)
☐ Assignee of Complete
☐ Filed under § 1.34(a)

Assignee of Complete Interest